



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E370931**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	14-02751	
LOCAL AGENCY CODING		
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION	
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M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	11	02	2014	0845	31						0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>
VERNON RD		BLOCK NO. <input checked="" type="checkbox"/>
		MILE POST <input type="checkbox"/>

DISTANCE	MILES	OF (REFERENCE OR CROSS STREET)

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4253453231
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LAST NAME	WARD	FIRST NAME	TOMMY	MIDDLE INITIAL	J
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STREET NEW ADDRESS	2307 118TH DR NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982589175
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CDL	RESTRICTIONS J	ENDORSEMENTS	
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DRIVER'S LICENSE #	WARD*TJ214CF	STATE	WA	SEX	M	D.O.B. MMDDYYYY	02	06	1979
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 3	RESTR. 9	EJECT 1	HELMET USE 2	INJURY CLASS 7	NATURE OF INJURIES UNKNOWN
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LICENSE PLATE #	APR5533	STATE	WA	VIN#	1HGEM1155YL031931
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2000	MAKE	HOND	MODEL	CIVIC	STYLE	CP	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	RESCUE TOWING	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.		LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # DAIRYLAND AUTO 474668881	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4252198474
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LAST NAME	ANDERSON	FIRST NAME	DONNA	MIDDLE INITIAL	M
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STREET NEW ADDRESS	2427 101ST AVE NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982588470
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CDL	RESTRICTIONS B	ENDORSEMENTS	
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DRIVER'S LICENSE #	ANDERDM411Q8	STATE	WA	SEX	F	D.O.B. MMDDYYYY	11	28	1959
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 6	RESTR. 4	EJECT 1	HELMET USE 2	INJURY CLASS 0	NATURE OF INJURIES
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LICENSE PLATE #	AHC1081	STATE	WA	VIN#	1N4AB41D5VC727024
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1997	MAKE	NISS	MODEL	SEN4D	STYLE	4D	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	RESCUE TOWING	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	DONNA ANDERSON 5900 64TH ST NE MARYSVILLE WA 98270		
LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	CHARGE



OFFICER'S NAME (PRINT)	J. KILROY #0132	BADGE OR ID #	#0132	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E370931**

CASE # **14-02751**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		FOSS RICKY L																	
ADDRESS & PHONE #		5900 84TH ST NE UNIT 111 MARYSVILLE WA 982704859										SEX	M	D.O.B. MMDDYYYY	12	-	27	-	1987
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	3	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	0	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		VINSON JON D																	
ADDRESS & PHONE #		2431 107TH DR NE LAKE STEVENS WA 98258 4254636734										SEX	M	D.O.B. MMDDYYYY	09	-	06	-	1987
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY		-		-	
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

Veh 1 was driving southwest on Vernon Rd in the northbound lane of travel. Veh 2 was traveling northbound in the northbound lane of travel. Veh 2 saw veh 1 and came to a stop in the northbound lane. Veh 1 continued in the northbound lane and struck Veh 2.

Veh 1 is at fault due to driving in the wrong lane of travel.

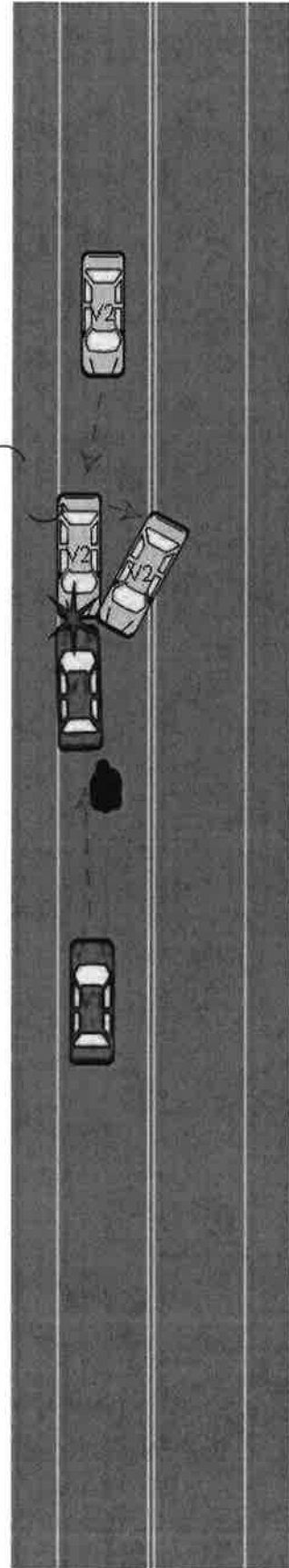
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

J. KILROY #0132		11-03-14 04:20 PM	
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET	PLACED SIGNED
APPROVED BY		DATE	
RON BROOKS 013		11/4/2014 9:51:23 AM	
BADGE OR ID #	#0132	ORI #	WA0311900
TIME POLICE DISPATCHED		TIME POLICE ARRIVED	
8:45 AM		8:45 AM	



DIAGRAM IS NOT TO SCALE

1600 VERNON RD



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-2751

VICTIM / WITNESS



NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Vinson, Jon D	RACE W	ETH -	SEX M	DOB 9/6/87	AGE 27	HGT 5'10"	WGT 190	HAIR BRN	EYES BRN
STREET ADDRESS 2431 107th DR NE		CITY Lake Stevens			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE 425-463-6734		CELL PHONE Same			PLACE OF EMPLOYMENT Boeing / Air Force					
WORK PHONE Same		EMAIL ADDRESS jonathon.d.vinson@boeing.com								

I, Jon Vinson, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

First on the scene I parked my car and approached vehicles involved in wreck. Red car, person was combusting and committing then stopped. I turned down radio and he still was breathing. He came to when police arrived. Other car everyone was able to walk. I did not see the initial impact.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED	LOCATION SIGNED
OFFICER/NUMBER: SKILROY/132	DATE SIGNED 11/2/14	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-27



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) FOSS RICKY LEE	RACE W	ETH	SEX M	DOB 12/27/67	AGE 46	HGT	WGT	HAIR	EYES
STREET ADDRESS 6720 BERKSHIRE DRIVE		CITY EVERETT		STATE WA		ZIP 98203		RES. STATUS		
HOME PHONE		CELL PHONE 714-858-6507		PLACE OF EMPLOYMENT BOEING						
WORK PHONE		EMAIL ADDRESS								

I, RICKY LEE FOSS, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

WE WERE DRIVING ^{NORTH} TOWARD LAKE STEVENS ON VERNON RD, WE SAW A RED CAR IN THE OPPOSITE ONCOMING LANE, WERE OVER INTO OUR LANE OF TRAVEL. I YELLED "STOP!" TO DRIVER (CHELLEE), WE CAME TO A COMPLETE STOP AND BRACED FOR IMPACT AS HE KEPT DRIVE AT US ~~AT~~ THE MIDDLE OF OUR LANE IN

IT TOOK ABOUT 2 SECONDS FOR HIM TO HIT US HEAD LIGHT TO HEAD LIGHT. THE AIR BAGS DEPLOYED, WE GOT OUT OF THE CAR IMMEDIATELY AND I CALLED 911.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Ricky L Foss</u>	DATE SIGNED	LOCATION SIGNED
OFFICER/NUMBER: SKILROY 1132	DATE SIGNED 11/2/14	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-2751

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Anderson, Donna M.	RACE C	ETH #	SEX F	DOB 11-28-59	AGE 54	HGT	WGT	HAIR	EYES
STREET ADDRESS 5900 64th St NE #111		CITY Marysville		STATE WA		ZIP 98270		RES. STATUS		
HOME PHONE 425-219-8474		CELL PHONE			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS								

I, Donna M. Anderson, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was driving down Vernon Rd toward Lundeen Pkwy, when my boyfriend & I suddenly saw a red vehicle in our lane heading directly for us. My boyfriend yelled, "Stop" & I hit the brakes, coming to a total stop. The other car kept coming, & hit us head-on.

I was heading north on Vernon Rd,

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Donna M. Anderson</u>	DATE SIGNED <u>11-2-14</u>	LOCATION SIGNED
OFFICER/NUMBER: <u>JKILRO4/132</u>	DATE SIGNED <u>11/2/14</u>	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

Case # 14-02751

LAKE STEVENS POLICE EVIDENCE UNIT				Primary Officer/Badge Number <i>SKILROY 1132</i>				Case Number <i>14-02751</i>			
Type of Crime: Felony / Misdemeanor (Circle)				Type of Case: <i>COLLISION</i>				Date/Time: <i>11/2/14</i>			
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING				*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfgk will be held for 60 days or 60 days past owner notification							

Item # Action #	1	Item <i>CD</i>	Brand Name	Storage Location	Disposition				
	3	Brand/Model/Caliber <i>DIGITAL PICTURES</i>							
		Serial #	Where Found			Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions									

Item # Action #		Item	Brand Name	Storage Location	Disposition				
		Brand/Model/Caliber (Further Description)							
		Serial #	Where Found			Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions									

Item # Action #		Item	Brand Name	Storage Location	Disposition				
		Brand/Model/Caliber (Further Description)							
		Serial #	Where Found			Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions									

Item # Action #		Item	Brand Name	Storage Location	Disposition				
		Brand/Model/Caliber (Further Description)							
		Serial #	Where Found			Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions									

Item # Action #		Item	Brand Name	Storage Location	Disposition				
		Brand/Model/Caliber (Further Description)							
		Serial #	Where Found			Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions									

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC ✓ Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC + Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC - Date:	Owner Letter Sent:	Yellow: Case File

Joshua Kilroy

From: Tommy Ward <tommyman00@live.com>
Sent: Sunday, November 2, 2014 6:21 PM
To: Joshua Kilroy
Subject: Tommy Ward accident 14-02751

My insurance policy number is 474666881 Insurance name Dairyland auto. My number is 425-345-3231

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND/TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH ___ DAY HOLD

☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.

☐ REGISTERED OWNER MAY REDEEM _____.

- ☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER/LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

- ☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. THEY WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

14-02751

VEHICLE INFORMATION

VIN

1 N 4 A B 4 1 D 5 V C 7 2 7 0 2 4

LICENSE

AHC1081

STATE

WASHINGTON

YEAR

1997

MAKE

NISSAN

MODEL

SEN4D

☐ Report of Sale
MILEAGE ☐ Digital

UNREADABLE

STYLE

SEDAN 4 DR

COLOR

GRAY

DRIVER

REGISTERED OWNER

LEGAL OWNER

NAME (LAST, FIRST, MI)

ANDERSON, DONNA M

NAME (LAST, FIRST, MI)

ANDERSON, DONNA M

NAME (LAST, FIRST, MI)

STREET ADDRESS

2427 101ST AVE NE

STREET ADDRESS

5900 64TH ST NE

STREET ADDRESS

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 982588470

CITY, STATE, ZIP CODE

MARYSVILLE, WA 98270

CITY, STATE, ZIP CODE

PHONE

(425)219-8474

DOB

11/28/1959

PHONE

PHONE

AUTHORIZATION AND RECEIPT

 ON 11/2/2014 AT 09:41 PURSUANT TO RCW 46.55.085 / 113 AND HAVING PERSONALLY INVENTORIED THE ITEMS
 (DATE) (24 HOURS)

 IN THE DESCRIBED VEHICLE, I AUTHORIZED RESCUE TOWING 5745.008
 (TOWING FIRM) (DOL TRUCK NO.)

 DRIVEN BY BAMA TO REMOVE THIS VEHICLE FROM 1600 VERNON RD
 (DRIVER'S PRINTED FIRST AND LAST NAME) (LOCATION)

EQUIPMENT

DAMAGE

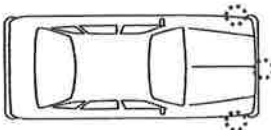
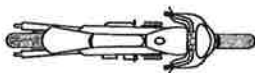
EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

- ☐ [] KEYS
☐ LOCKED TRUNK
☐ LOCKED GLOVE BOX
☐ LOCKED CENTER CONSOLE
☒ AUTO STEREO
☐ [] DISC(S)
☐ HANDS FREE DEVICE
☐ GPS
☐ RADAR / LIDAR DETECTOR
☐ SPARE TIRE
☐ JACK
☐ CHAINS
☐ OTHER _____

- ☒ FRONT
☒ R FRONT
☐ R SIDE
☐ R REAR
☒ L FRONT
☐ L SIDE
☐ L REAR
☐ REAR
☐ TOP
☐ UNDERCARRIAGE
☐ OTHER _____

SHADE DAMAGED AREA



INVENTORY

NARRATIVE OR DIAGRAM

(List reasons(s) for impound.)

Veh in collision

☒ I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT TO THE TOWING FIRM'S OPERATOR WHO TOOK POSSESSION OF THE VEHICLE.

☐ I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE TO THE DRIVER OF THIS VEHICLE.

☒ THE VEHICLE WAS ABANDONED - A COPY OF THE TOW / IMPOUND REPORT WAS LEFT WITH THE VEHICLE.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT (RCW 9A.72.085), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER'S ELECTRONIC
SIGNATURESNOHOMISH, WA
COUNTY, WA013
BADGE NO.Lake Stevens PD
AGENCY

3000-110-076 (R 07/13)

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND/TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH ___ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER/LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

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UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

14-02751

VEHICLE INFORMATION

VIN

1 H G E M 1 1 5 5 Y L 0 3 1 9 3 1

LICENSE

APR5533

STATE

WASHINGTON

YEAR

2000

MAKE

HONDA

MODEL

CIVIC

MILEAGE ☐ Digital☐ Report of Sale

UNREADABLE

STYLE

COUPE

COLOR

RED

DRIVER

REGISTERED OWNER

LEGAL OWNER

NAME (LAST, FIRST, MI)

WARD, TOMMY J

NAME (LAST, FIRST, MI)

NAME (LAST, FIRST, MI)

STREET ADDRESS

2307 118TH DR NE

STREET ADDRESS

STREET ADDRESS

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 982589175

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

PHONE

DOB

2/6/1979

PHONE

PHONE

AUTHORIZATION AND RECEIPT

ON 11/2/2014 AT 09:31 PURSUANT TO RCW 46.55.085 / 113 AND HAVING PERSONALLY INVENTORIED THE ITEMS
 (DATE) (24 HOURS)

IN THE DESCRIBED VEHICLE, I AUTHORIZED RESCUE TOWING 8745.008
 (TOWING FIRM) (DOL TRUCK NO.)

DRIVEN BY BAMA TO REMOVE THIS VEHICLE FROM 1600 VERNON RD
 (DRIVER'S PRINTED FIRST AND LAST NAME) (LOCATION)

EQUIPMENT

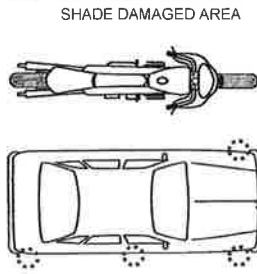
DAMAGE

EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

- ☐ [] KEYS
☐ LOCKED TRUNK
☐ LOCKED GLOVE BOX
☐ LOCKED CENTER CONSOLE
☒ AUTO STEREO
☐ [] DISC(S)
☐ HANDS FREE DEVICE
☐ GPS
☐ RADAR / LIDAR DETECTOR
☐ SPARE TIRE
☐ JACK
☐ CHAINS
☐ OTHER _____

- ☒ FRONT
☒ R FRONT
☒ R SIDE
☒ R REAR
☒ L FRONT
☐ L SIDE
☐ L REAR
☐ REAR
☐ TOP
☐ UNDERCARRIAGE
☐ OTHER _____



INVENTORY

NARRATIVE OR DIAGRAM

(List reasons(s) for impound.)

Veh in Collision

☒ I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT TO THE TOWING FIRM'S OPERATOR WHO TOOK POSSESSION OF THE VEHICLE.

☐ I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE TO THE DRIVER OF THIS VEHICLE.

☒ THE VEHICLE WAS ABANDONED - A COPY OF THE TOW / IMPOUND REPORT WAS LEFT WITH THE VEHICLE.

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OFFICER'S ELECTRONIC
SIGNATURE

SNOHOMISH, WA

COUNTY, WA

013

BADGE NO.

Lake Stevens PD

AGENCY

3000-110-076 (R 07/13)

Incident History for: #SS14021799 Xref: #AG14003142

Case Numbers: \$SS14002751

Entered 11/02/14 08:45:24 BY SPCT07 SP0357

Dispatched 11/02/14 08:45:37 BY SPDP17 SP0371

Enroute 11/02/14 08:45:37

Onscene 11/02/14 08:49:45

Closed 11/02/14 09:51:29

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS002 Fire BLK: AG1618 Map Page: 377E-6 Group: SS1 Beat: WEST

Src: T

Loc: 1610 VERNON RD ,LKS btwn 95 AV NE & LUNDEEN PARK WY (V)

Loc Info:

Name: VOSS, RICKY

Addr:

Phone: 7148586507

/0845 (SP0357) ENTRY , 2 VEHs, HEAD ON, OTHER DRIVER NOT CONS

/0845 (SP0371) DISPER 19D2 #SS112 WARBI, OFFICER (STEVE)

/0845 ASSTER 19D3 #SS120 BERNHARD, OFFICER (KERRY)

/0846 ASSTER 19D1 [1610 VERNON RD ,LKS]

#SS132 KILROY, OFFICER (JOSH)

#SS75 CHRISTENSEN, OFCR (CHAD)

/0846 (SP0357) SUPP NAM: VOSS, RICKY,

PHO: 7148586507,

TXT: BLKING, SIL NISSAN SENTRA VS RED HONDA, AIR

BAGS DEPLOYED, CORRECTION, OTH ER DRIVER IS CONS

/0847 SUPP TXT: PT NOW POSTICTAL, BREATHING VERIFIED

/0849 (SP0371) ASSTOS 19S10 [1610 VERNON RD ,LKS]

#SS13 BROOKS, SGT (RON)

/0850 ONSCNE 19D1

/0851 (SS112) *ONSCNE 19D2

/0851 (SP0371) ONSCNE 19D3

/0851 (SP0251) SUPP TXT: ALNW CALLED BACK THINKS THEY COULD FLY BUT
WOULD NEED UPDATED WEATHER REP ORT FROM LZ, NOT
ON STAND BY

/0854 (*****) REMINQ 19D1 AHC1081

/0854 (SP0371) REMINQ 19D1 LIC, 19D1, AHC1081, , ,

/0854 (*****) REMINQ 19D1 APR5533

/0854 (SP0371) REMINQ 19D1 LIC, 19D1, APR5533, , ,

/0859 (*****) REMINQ 19D2 WARD. TOMMY. J. 02061979. .

/0859 (SP0371) REMINQ 19D2 NAME, 19D2, WARD, TOMMY, J, 02061979, ,

/0909 (SS112) *MISC 19D2 , ON TRAFFIC CONTROL, VERNON AND LUNDEEN ROUNDABO
UT

/0912 (SP0371) ROTREQ 19D1 TOW 5745 LKS RESCUE TOWING

4253345821 , 2 TOWS, AT LEAST ONE FLAT BED

/0912 ASNCAS 19D1 \$SS14002751

/0913 MISC 19D1 , RESCUE TOWING ENROUTE

/0924 MISC 19D1 , TOW ONSCENE

/0936 (SS13) REMINQ 19S10 MDTVEH, APR5533, , WA, , , , , , , , ,

/0946 *CLEAR 19S10 D/D

/0949 (SS120) CLEAR 19D3

/0951 (SS112) *CLEAR 19D2 D/D

/0951 (SP0371) CLEAR 19D1 D/H

/0951 CLOSE 19D1